

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10757530

FILED DATE 1-15-04

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		2				
4		1				
5						
6						
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49						
50						
TOTAL IND.	1					
TOTAL DEP.	4					
TOTAL CLAIMS	5					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
52						
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						